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COVER SHEET



Doc# 1811329022 Fee \$44.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 04/23/2018 02:10 PM PG: 1 OF 4

COVER SHEET FOR RECORDING DECEASED JOINT TENANCY AFFIDAVIT

Legal Description:

PARCEL 1: UNIT 311 IN EDGEWOOD VALLEY CONDOMINIUM D, AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 22520478, IN THE NORTHEAST ¼ OF SECTION 29, TOWNSHIP 38 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2: EASEMENTS APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1, FOR INGRESS AND EGRESS, AS SET FORTH AND ESTABLISHED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 22249106, IN COOK COUNTY, ILLINOIS.

Property Index Number: 18-29-202-040-1029

Property Address: Unit 311, 10711 5th Ave., Cut-Off, Countryside, IL 60525

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DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS)
COUNTY OF COOK) SS.

File Number:

ZARKO PETROVIC
being duly sworn states that HE resides at 500 CHASE RD., UNIT 8 in the City of CLARENON HILLS, IL 60514.

That HE was acquainted with MILUNKA PETROVIC and MILISAV PETROVIC, deceased who, at the time of death, was one of the owners of the land in COOK County, Illinois, describes as:

That the deceased died MILUNKA - JUNE 14, 2016 MILISAV - DECEMBER 23, 2017, as evidenced by a certified copy of death certificate of the deceased attached hereto.

- That the deceased died: Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of Cook County, Illinois about _____.

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of 50,000.00 dollars.

Affiant makes this affidavit for the purpose of inducing N/A to issue its Title Insurance Policy., describing the above mentioned property.

Subscribed and sworn to before me by the said

Zarko Petrovic

this 27th day of March, A.D. 20 18.

Kimberly A. Macejak
Notary Public

Zarko Petrovic
(Affiant's Signature)



CERTIFICATION OF DEATH RECORD

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0105419


DATE ISSUED 1/5/2018

DECEDENT'S LEGAL NAME MILISAV PETROVIC		SEX MALE	DATE OF DEATH DECEMBER 28, 2017														
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 92 YEARS	DATE OF BIRTH JANUARY 12, 1925															
CITY OR TOWN LAGRANGE		HOSPITAL OR OTHER INSTITUTION NAME ADVENTIST LAGRANGE MEMORIAL HOSPITAL															
PLACE OF DEATH INPATIENT																	
BIRTHPLACE SERBIA	SOCIAL SECURITY NUMBER [REDACTED] 4391	STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO													
RESIDENCE 10711 W 5TH AVENUE		APT. NO. 311	CITY OR TOWN COUNTRYSIDE	INSIDE CITY LIMITS? YES													
COUNTY COOK	STATE IL	ZIP CODE 60525	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LIUBOMIR PETROVIC	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MILOSAVA MILIVOJEVIC													
INFORMANT'S NAME ZARKO PETROVIC		RELATIONSHIP SON	MAILING ADDRESS 500 CHASE DRIVE UNIT 8, CLARENDON HILLS, IL, 60514														
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION NEW GRACANICA SERBIAN ORTHODOX CEMETERY	LOCATION: CITY OR TOWN AND STATE THIRD LAKE, IL	DATE OF DISPOSITION JANUARY 03, 2018														
FUNERAL HOME HALLOWELL AND JAMES COUNTRYSIDE, 1025 W. 55TH STREET, COUNTRYSIDE, IL, 60525																	
FUNERAL DIRECTOR'S NAME MATTHEW J GADBOIS			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016360														
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 4, 2018														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="width: 15%; vertical-align: top;"> CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death) </td> <td style="width: 10%;">PART I.</td> <td style="width: 55%;">COMPLETE HEART BLOCK</td> <td rowspan="4" style="width: 10%; text-align: center; vertical-align: middle;">APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH</td> </tr> <tr> <td>a</td> <td>Due to (or as a consequence of):</td> </tr> <tr> <td>b</td> <td>MYOCARDIAL INFARCTION</td> </tr> <tr> <td>c</td> <td>Due to (or as a consequence of):</td> </tr> <tr> <td colspan="3">: Due to (or as a consequence of):</td> </tr> </table>					CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death)	PART I.	COMPLETE HEART BLOCK	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	a	Due to (or as a consequence of):	b	MYOCARDIAL INFARCTION	c	Due to (or as a consequence of):	: Due to (or as a consequence of):		
CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death)	PART I.	COMPLETE HEART BLOCK	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH														
	a	Due to (or as a consequence of):															
	b	MYOCARDIAL INFARCTION															
	c	Due to (or as a consequence of):															
: Due to (or as a consequence of):																	
PART II. Enter other <i>significant conditions contributing to death</i> , but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? NO														
FEMALE PREGNANCY STATUS NOT APPLICABLE			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A														
MANNER OF DEATH NATURAL																	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?														
LOCATION OF INJURY																	
DESCRIBE HOW INJURY OCCURRED:			IF TRANSPORTATION INJURY, SPECIFY:														
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE DECEMBER 28, 2017	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 03:23 PM													
CERTIFIER PHYSICIAN			DATE CERTIFIED DECEMBER 29, 2017														
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH: DR KAREN BOTSOE, 5201 S WILLOW SPRINGS ROAD, SUITE 150, LAGRANGE, ILLINOIS, 60525			PHYSICIAN'S LICENSE NUMBER 036118025														

D00184108



This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.


 David Orr
 Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM

CERTIFICATION OF DEATH RECORD
UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2016 0047719 DATE ISSUED 6/20/2016

DECEDENT'S LEGAL NAME MILUNKA PETROVICH		SEX FEMALE	DATE OF DEATH JUNE 14, 2016	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 87 YEARS	DATE OF BIRTH OCTOBER 28, 1928		
CITY OR TOWN LAGRANGE	HOSPITAL OR OTHER INSTITUTION NAME AMITA HEALTH ADVENTIST MEDICAL CENTER - LAGRANGE			
PLACE OF DEATH INPATIENT				
BIRTHPLACE YUGOSLAVIA	SOCIAL SECURITY NUMBER ████████-4406	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME MILISAV PETROVIC	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 10711 5TH AVENUE CUTOFF	APT. NO. 311	CITY OR TOWN COUNTRYSIDE	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60525	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LJUBIVOJE JEVREMOVIC	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION DAFINA RADOICIC
INFORMANT'S NAME MILISAV PETROVIC		RELATIONSHIP HUSBAND	MAILING ADDRESS 10711 5TH AVENUE CUTOFF, COUNTRYSIDE, IL, 60525	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION NEW CACANICA SERBIAN ORTHODOX CEMETERY	LOCATION - CITY OR TOWN AND STATE THIRD LAKE, IL	DATE OF DISPOSITION JUNE 18, 2016	
FUNERAL HOME HALLOWELL AND JAMES COUNTRYSIDE, 1025 W. 55TH STREET, COUNTRYSIDE, IL, 60525				
FUNERAL DIRECTOR'S NAME DUANE TROJNAR			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015689	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JUNE 17, 2016	
CAUSE OF DEATH - PART I SEPSIS				
IMMEDIATE CAUSE (Final disease or condition resulting in death) a. COMMUNITY ACQUIRED PNEUMONIA				
Due to (or as a consequence of): b.				
Due to (or as a consequence of): c.				
Due to (or as a consequence of):				
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I. TYPE 2 DIABETES MELLITUS			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE			MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED:				IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JUNE 14, 2016	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 07:53 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JUNE 16, 2016	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH KAREN BOTSOE, 5201 SOUTH WILLOW SPRINGS ROAD, LAGRANGE, ILLINOIS, 60525				PHYSICIAN'S LICENSE NUMBER 036118025

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH



DECEDENT ALIAS
AKA MILUNKA PETROVIC

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David Orr
David Orr
Cook County Clerk

